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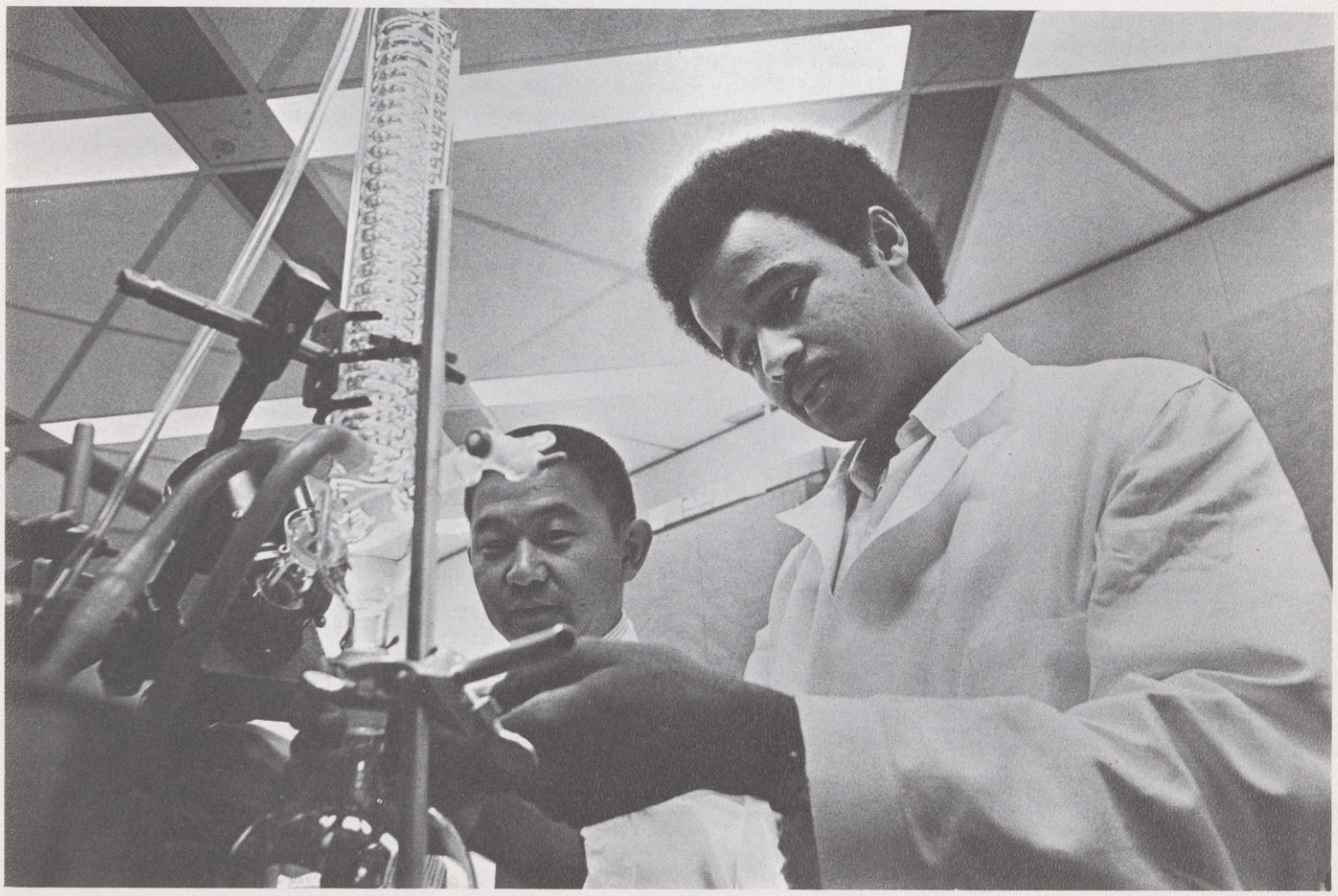
Health care needs skyrocket

In the United States today there are 190 million people — 100 million more than lived here in 1910 and 200 million LESS than will be alive in just four decades.

In less than just one decade, 1½ million new health workers will be needed. By 1975, the "health industry" will be the Number One industry in the nation. Already there are enormous demands on the country's health resources.

Why? Because it is generally recognized that health care is a right and not a privilege. Because, despite the pill, the population is increasing. Because there is a demand for more and better education. And because of the expansion of private health insurance programs.

With all this, there is an alarming shortage of physicians and of students choosing to enter the allied health professions. How the UC Medical Center is taking bold steps to meet this crisis is the subject of some stories in this issue.



Young people like Richard King, right, are getting a first-hand look at health careers through jobs on the campus.

Instructing in laboratory procedures is Dr. Frank Yatsu, assistant professor, neurology department, UC Medical Center.

A NEW FOCUS

Recruitment programs are here to stay

It was four years ago that a faculty committee at UC Medical Center recommended to the chancellor that active recruiting of underprivileged students for careers in medicine should "begin immediately."

That recommendation has helped launch a drive not only to interest students in health sciences but to increase the number of minority students on the San Francisco campus.

"We feel that the racial composition on campus should simply reflect the general view of society. Right now, it doesn't," contends Dean of Students Theodore Swenson.

Why this gap in a field where opportunities are burgeoning along with the health needs of a growing population?

"In talking to students – especially to Negroes – we found they were reluctant even to apply for admission. They simply assumed they would be rejected," Swenson explains.

The active recruitment of black students got its first push when Dr. Thomas N. Burbridge, associate professor of pharmacology in the School of Medicine, was asked by the chancellor to visit Negro colleges in the South.

The first trip resulted in 31 applications to the School of Medicine. Five were accepted. The second trip a year later produced 25 applicants, of which seven were accepted.

According to Dr. Burton Wise, present chairman of the admissions committee for the School of Medicine, recruitment efforts will now mainly be focused on California.

All four professional schools – dentistry, medicine, pharmacy and nursing – have faculty and student groups engaged in recruitment programs.

"And we are headed toward more formal programs like these," Swenson believes, especially in regard to minority students from disadvantaged backgrounds.

Programs to step up recruitment of qualified minority students at UC Medical Center are mapped out by Dean of Students Theodore Swenson and assistant, Nancy Kull.

With these students, there can be an added hurdle – lack of adequate academic preparation. And while UC Medical Center has every intention of maintaining its high standards for admission and education, Swenson also says this:

"In giving consideration to these students, we are finding special techniques to measure their capabilities. We recognize there has been a middle class bias in assessment procedures.

"A black student might be able to meet our standards and still not be able to demonstrate this on an examination."

Now in its third month this summer is a program which aims not only at introducing high school students to the campus but at triggering their interest in health sciences, according to Nancy Kull, assistant to the dean of students.

In co-operation with Neighborhood Youth Corps, which pays their salaries of $1.37 an hour for a 26-hour week, the Medical Center has provided jobs for 58 young men and women in laboratories, offices, with individual faculty members, in many hospital departments.

Coupled with working hours are informal classes where young people discuss career interests with Medical Center students, who also act as liaison and counselors for groups of eight to 10.

Another recruitment route is the Educational Opportunity Program which concentrates on four needs of disadvantaged students who wish to make careers of health sciences: financial aid, special admission procedures, academic support with tutoring, summer programs and special courses, and orientation to the campus and its white middle class environment.

Still without funds is another program Swenson would like to see inaugurated. It would focus on providing means for people already in health fields to gain access to more highly trained professional roles without "starting all over."

Emphasis would be on on-the-job training bolstered by some formal education. "It would give trainees a chance to make their own career choices and also be partners in the planning. Ideally speaking, it would allow for lateral as well as vertical training. We think it would work," Swenson says.

She tells it the way it is . . .

A few weeks ago in San Francisco, Manhattan Borough president Percy Sutton, chided a Sacramento legislator for introducing him as "the highest elected Negro official in New York."

"The highest black official," Sutton corrected him firmly.

An articulate and buoyant young woman named Melanie Jackson, who is currently working as liaison recruitment officer for Dean of Students Theodore Swenson, shares similar convictions.

"When I was little, being a Negro was never discussed. It was something you didn't talk about. But while I was at Poly High something changed," says Melanie, who has completed her first semester at UC in Berkeley.

"It was all those kids, so many black kids you became aware of blackness. But I still know people who say 'colored.' "

The vivacious Miss Jackson, only the second co-ed in Poly High history to be elected president of the Student Body, is concerned in her job at UC Medical Center with interesting minority—especially black—students in specializing in health science careers.

One explanation for currently widespread indifference, she feels, is this:

"I think my own experience was typical. I was never very interested in science in junior high or high school. Classes were never stimulating. There was no way to relate the information to my own experience.

"And the general impression was that health sciences were intended for the brilliant white student only. There are more blacks in sociology than in health sciences because it's closer to their lives. Most of them have lived what they read in the textbooks."

Many youngsters, Miss Jackson maintains, are "pushed into something like a business education major and do poorly because they aren't interested, so they take jewelry making and shop because it's the easy way out.

"It's as if science and math courses are somehow ethereal and far away, like the Medical Center – those big white buildings on the hill."

What's going on this summer in youth employment, companionship and tutorial programs may help change that Medical Center image, Miss Jackson hopes.

"I know one boy who was finishing high school with no idea of what he wanted to do. He's working in the pharmacy department here, and is going to apply for admission to Pharmacy School."

There are other success stories like this, and Miss Jackson thinks the tutorial program initiated by Medical Center students and staffers in cooperation with Poly High is a step in the right direction.

"The sad thing is that the ones who need it never seem to get it, but the ones who do take advantage of tutors' help are truly grateful, and some fine friendships come out of it.

"And I think students at Poly can teach medical students something, too. And the Medical Center can do a good recruiting job with the idea that 'you CAN come here and you CAN make it,' because most black students just don't believe in themselves."

Selling health sciences careers to students should begin early, Miss Jackson believes, at least in junior high, where minority students are concerned.

"When I was in junior high, I wasn't aware of race. Today, I worry about too much awareness. I had a childhood of fantasies and games. Kids now are told right off 'there's NO Santa Claus.' "

All the money Miss Jackson earns this summer on her Medical Center job will go for her education.

In health sciences? "Right now," she confesses, "I'm majoring in knowledge. But who knows? I just haven't made up my mind yet."

Most black students . . .

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. . . in themselves

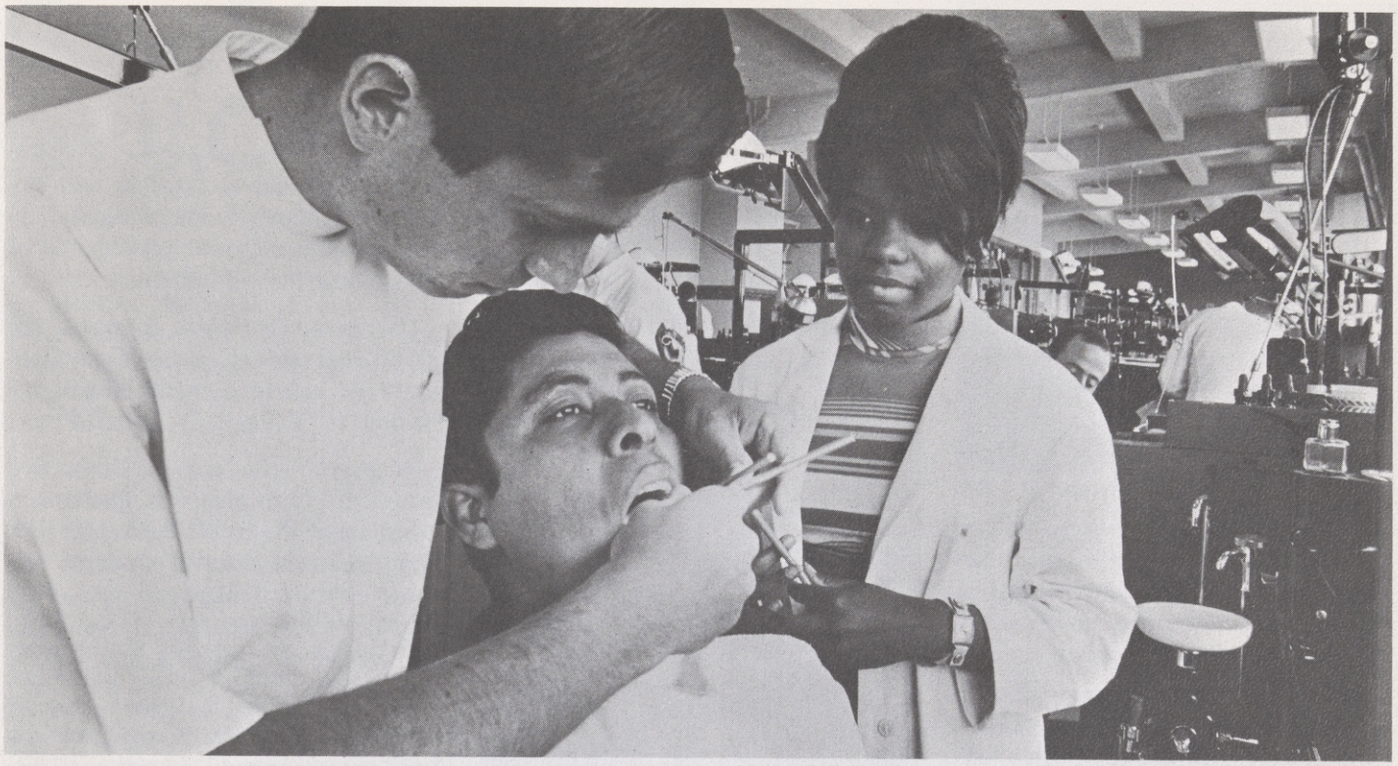
NEWCOMERS ON CAMPUS

Summertime jobs encourage new interest in careers

In co-ordination with Neighborhood Youth Corps, the UC Medical Center is employing more than 50 high school age students in summer jobs on the campus. Young people work 26 or more hours a week in laboratories, offices and many hospital departments and clinics. Assistant Dean of Students Booker Williams, above, watches Sharon Williams about to fill the sterilizer in the micro-biology department.

Norma Kent, UC liaison, Neighborhood Youth Corps

Lodema Stephans Learning to stain slides



On-the-job learning is part of the dental assistant's program which employs Jeanette Butler, above, on the campus this summer.

NEW PROFESSIONS ON THE HORIZON

Because the United States' increasingly affluent population will more than double in little more than a generation, the current manpower shortage in the health professions is a crisis.

To meet the issue head-on, UC Medical Center has set up a unique Allied Health Professions project headed by Dr. Earle M. Marsh. Its goals: To investigate the allied health professions, to work up educational solutions and, if possible, to educate allied health professionals to help doctors and nurses care for patients.

In January, 1967, when the project was launched, UC Medical Center was offering these training programs: dental hygienist, dietitian, exfoliative cytologist (screening slides for presence of abnormal cells); medical illustrator, medical technologist, orthoptic (ophthalmological) and physical therapists.

As far as the Allied Health Professions project is concerned, this is only the beginning. Already in the development stage are plans for these new health careers:

● Radiology associate and radiology assistant. It is hoped that one or two students may enroll this fall on a trial basis.

● Maternity nurse specialist. A graduate UC nursing student is now being trained at Children's Hospital to assume almost total responsibility for uncomplicated prenatal care.

● Orthopedic assistant. First students may be accepted by City College of SF in September, 1969, to train as technical assistants to orthopedic surgeons, with clinical education to be offered at Pacific Medical Center and UC Medical Center.

● Inhalation therapist. With a go-ahead from a faculty committee, City College of SF will offer a two-year academic curriculum leading to an Associate of Arts degree, and community hospitals and the Medical Center will offer their clinic resources for training.

Now under consideration by Allied Health Professions Project are even more training programs for new career specialties:

● Acute-ward technician — to check vital signs of patients in an acute ward with medical and nursing supervision available.

● Pharmacy technician—to carry out routine duties such as pill counting and packaging and free the professional pharmacist for consultation time on a health team.

● Medical laboratory electronics engineer — to install and maintain computerized equipment in clinical laboratories.

● Patient care co-ordinator, who is trained in hospital administration, and optic and medical record technicians.

Dr. Marsh: 'Put everybody on the team'

The amiable and articulate co-ordinator of Allied Health Professions at San Francisco UC Medical Center thinks it's time to shake up the system.

Says Dr. Earle M. Marsh: "We must program ourselves for a change. What we have to fight against is resistance to change. The status quo of our society is the biggest handicap we have.

"Allied Health Professions means EVERYONE in the health field. Not just doctors or doctors and nurses or doctors and nurses and dentists and pharmacists — but everybody."

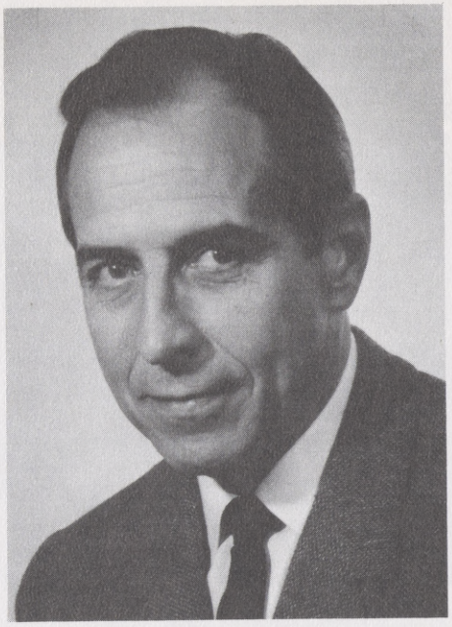
The gynecologist was appointed to his co-ordinator post in December, 1966, to find out one thing: How better to train health professionals and utilize them in new ways to improve patient care.

"What IS the problem in health training? Where are the people we need? Why do we have a shortage? Those are questions I asked every institution of higher learning in San Francisco," Dr. Marsh recalls.

What he found out from University of San Francisco, SF College for Women, City College of SF, Golden Gate College and SF State College was that one college wasn't interested in what was happening next door in health professions education.

So he launched a campaign to bring people together in a series of meetings to discuss the health professions shortage and how to erase it. Out of this came the Health Consortium made up of professionals in hospitals, academicians, presidents of medical, dental, pharmaceutical and nursing societies, physical and occupational therapists, dietitians, social workers. "No professional health group was overlooked."

Next step: A Health Professions Council of SF to decide who trains where, to what level, for how long and with what curriculum. And what to do in the field of upward mobility — perhaps an X-ray technician wants to study dentistry, then what?



Dr. Earle Marsh
Shaking up the status quo

"It isn't easy without starting all over," Dr. Marsh says. "Professions and occupations in our society are trained terminally. There are horrible problems in finding ways to let people move up the ladder, but we are making progress."

Besides beefing up the consortium philosophy, Dr. Marsh is interested in new careers in health professions and in how to help disadvantaged minorities get work experience.

"Our emphasis is on upward and lateral mobility, so there's always hope for something better," the physician insists.

Sharing this philosophy is Dr. Bill Garoutte, chairman of the Committee to Interest Students in Health Sciences. "Brochures won't do it," he says of recruitment. "Somebody has to see it to believe it."

A new program designed to spark interest in health professions and to speed student recruitment has Dr. Garoutte's support. It is the brainchild of a student-developed and student-staffed committee, and the sparkplug is Alex Stalcup, president of the second year Medical School class. Direct communication is the goal, and whenever possible between minority students from Medical Center and students in high schools or colleges all over the state.

The committee plans to cover 136 public and private schools in California in its recruitment efforts, according to Stalcup.

Once the student is interested enough to apply, his first question is "what about the cost?" Booker T. Williams, assistant dean of students and counselor to minority applicants, advises them that federal aid, loans and scholarships can make a medical career possible.

Williams finds that many black students are interested in social medicine and "many will go back to the ghetto where they can exert some influence on the community."

Also concentrating on California in recruitment activities is the School of Dentistry, where Dr. Gilbert Oliver is a moving force.

"We must take on a larger area of responsibility than just being here," he believes. "We must let minority students know that dentistry training is available to them and HOW it is available. I've been on the admissions committee for seven years, and for much longer than that no black student has completed an application. At least, we are beginning to find out why."

In recruiting students into health professions, Dr. William Ganong, professor of physiology, warns: "One thing gets lost in the picture. That is, UC Medical Center grants Ph.Ds and MAs, too; it's not just a trade school.

"We need both doctors and people to train them. It is important to develop medical scientists to train MDs as well as PhDs to train faculty members for medical schools tomorrow."

Of his own field of endocrinology, Dr. Ganong says bluntly: "Plenty of opportunities there. We've learned a great deal, but there's a hell of a lot more to learn."

Chancellor Fleming views the U.C. budget crisis

The University of California's ambitious plans, including development of three new medical campuses, may be greatly curtailed if the "crisis" budget of the past two years is continued in the future, says Chancellor Willard C. Fleming of the San Francisco Medical Center.

"I do not believe our present programs will deteriorate, but the very fact that this budget precludes new and improved programs will keep us from progressing with the times. Other educational institutions in the country are broadening rather than restricting their programs. We are no longer among the leaders and this is a new way of life for the University of California.

"Operating budget for UC for the current year is $276 million – $34 million less than the amount requested by the Regents, $6 million less than the amount approved by the Legislature, and $3 million less than the amount originally proposed by the Governor.

"While I do not oppose Gov. Reagan's budgetary objectives for the State, we differ in the areas of health and education, and this is in the matter of priorities. Perhaps I have an advantage of historical perspective that he does not have. I have seen the great values that accrued to California and to the people when California was an agricultural state and strong support was given to the University in the area of agriculture. Now, California is changing from an agricultural to an urban state and the University needs this same degree of support to render to the people the same values in the area of health, education and social reforms.

"A knowledge of history allows one to chart a course of progress to date and project that curve as a curve of probability into the future. The budget crisis of the last two years has flattened, if not reversed, the curve of past development."

Dr. Fleming has spent more than 50 years on the San Francisco campus as a student, professor, dean and now Chancellor. He cites UC's contributions in education, research and service to the State over the past 100 years as helping to provide economic prosperity, advanced technology and better educated youngsters.

"Most of these contributions were not of a sensational nature. It seems that each time a research breakthrough or health service is rendered, such as the Mobile Examination Units at the San Francisco Medical Center, little notice is taken by the press, radio or television – compared to what is written when something sensational occurs."

Dr. Fleming feels this is also reflected in the tragic plight the University finds itself in today: that the actions of a few – an almost infinitesimal minority, have polarized public opinion about U.C. – overlooking the vast majority. He feels that the public has formed an opinion of the University based upon what it has viewed and read of sit-ins and demonstrations – and that the public presumes that the entire University must be like that.

"Nothing could be farther from the truth. Ferment – yes, because this is healthy in the academic community. Anarchy – no. Having spent most of my life with the University of California, I know that Californians can well be proud of the University. I think it would be a tragic mistake to diminish the effectiveness of the University because of isolated actions of a few students.

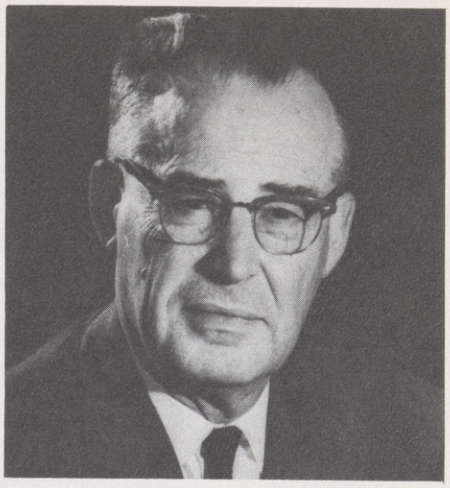
"The same allegory could be drawn of today's youth. Who gets all the television and newspaper coverage? Those who participate in student affairs? Those who make constructive contributions to the political life of the country?

"Or is it the ones who smoke pot? Or run away to the Haight-Ashbury and get into trouble? Or write dirty words on placards?

"It is much the same with U.C. students – those of bizarre behavior and dress who write questionable words on signs. These are the ones who get the attention – not the hardworking students studying in the library and laboratory.

"You will see that my indictment of a few administrators, faculty and students also includes the news media. I think I do understand the problem of the news media, but it does remind me of the story of the man who met a bear on a narrow mountain trail. He began a life and death struggle with him. The man was not a particularly religious person so he felt that it was not proper to call on God when he was in such a desperate circumstance. So as he fought with the bear, he said, 'Oh, God, I'm not going to ask you for help at this time, but please God, don't help the bear.'

"For every student who burns his draft card or carries a questionable sign, there are thousands of others attending the University to get an education – making better citizens for tomorrow and making a better world for all of us."



Chancellor Willard Fleming
An advantage of historical perspective

But what about the next 100 years?

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Irwin shows new emblem

There's something new at Irwin Memorial Blood Bank of San Francisco Medical Society—a recognition award program for its voluntary blood donors.

New, too, is a distinctive emblem designed for the nation's first nonprofit, community blood bank by Francis Mair of Walter Landor & Associates.

The new emblem is a shield and a stylized open hand holding a drop of blood. It represents "the protection Irwin provides to more than 1½ million people in eight Northern California Counties, the donor who gives and the patient who receives and also symbolizes the 96,000 units of blood the blood bank procures, processes and dispenses every year," according to Mrs. Bernice M. Hemphill, managing director.

One drop of blood

The donor recognition awards will go to first-time donors, as well as to donors who have given eight, 16, 24, 32 and 40 times to the blood bank.

Awards are limited to those who have made voluntary donations at Irwin Memorial Blood Bank or its auxiliary centers in Marin, Shasta and Solano counties or at mobile operations.

First Health Fair slated Oct. 22-27 in Brooks Hall

The Bay Area's first Health Fair will be staged Oct. 22-27 at Brooks Hall under the sponsorship of the SF Medical Society and the co-sponsorship of SF Dental Society and the SF Hospital Conference.

Besides exhibits and demonstrations by medical specialists, hospitals and government and public health agencies, there will he programs to screen visitors for health deficiencies. All will be free of charge and open to the public.

The Health Fair, which celebrates the Medical Society's 100th birthday, also proposes to acquaint high school students with career opportunities in the health field, according to Dr. George K. Herzog Jr., chairman of the fair.

Experts will be on hand to counsel both students and mature adults about available jobs and future opportunities in allied health professions.